

Work Order ID 90330

90330

Page 1

September-17-12 1:20:27 PM

Item ID: D2892-1 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Support
 Start Date: 9/17/12 Start Qty: 6.00 *6* Cust Item ID:
 Required Date: 10/12/12 Req'd Qty: 6.00 *6* Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 12-09-18 Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2892	B								
100	HAAS CNC VERTICAL MACHINING #1	0.00							
100									
HAAS 1	Memo	0.00							
HAAS CNC vertical machine #1	1-Machine as per Folio FA082 2-Deburr								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110									
QC	Memo	0.00							
Quality Control									
120	QC8- Inspect parts - second check	0.00							
120									
QC	Memo	0.00							
Quality Control									

24 12-9-24

6 4

24 12-9-24

6 4

DA 14 12/09/24
 9-83
 FR 12/09/25

6 8

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 90330

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Page 2

September-17-12 1:20:27 PM

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 Item Name: Support
 Start Date: 9/17/12 Start Qty: 6.00 *6* Cust Item ID:
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Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	Per note 8 on page 1 of dwg D2892, Prep inner concave surface of support and apply 3M Scotch-Weld as per dwg. 24h of cure time								
140	QC3- Inspect Part Finish	0.00							
140									
QC	Memo	0.00							
Quality Control									
170	Identify as per dwg & Stock Location: <u>LG52</u>	0.00							
170									
Packaging	Memo	0.00							
Packaging									

AS 12-9-27 (6)

(6)

DAS 05 12-9-27

6 0 0 AS 12-11-5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
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Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 90330***90330***

Page 3

September-17-12 1:20:27 PM

Item ID: D2892-1

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Support

Start Date: 9/17/12

Start Qty: 6.00

6

Cust Item ID:

Required Date: 10/12/12

Req'd Qty: 6.00

6

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

180

QC21- Final Inspection - Work Order Release

0.00

180

QC

Memo

0.00

Quality Control

12/11/12
MLJ 12-11-05

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

September-17-12 1:20:27 PM

Page 1

Work Order ID: 90330

Parent Item: D2892-1

Start Date: 9/17/12

Required Date: 10/12/12

Parent Item Name: Support

Start Qty: 6.00

Required Qty: 6.00

Comments:

IPP C02.11.26Added P/O KJ

IPP D 08.03.19 Re-format EC verified by: DD

IPP Rev:E 11.08.04 as per dwg

rev.B DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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DSK077

Manufactured

No

110

Each

7.0000

0.5

3

D2892-1 TURNING DETAIL

Location

Loc Qty

Loc Code

MAT060

7

82700 ✓

7

2

20 12-9-24

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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DART AEROSPACE LTD		Work Order:	90330
Description: Ø2.500 Support		Part Number:	D2892-1
Inspection Dwg: D2892	Rev: B	Page 1 of 1	

FIRST ARTICLE INSPECTION DIMENSION SHEET

☒ First Article ☐ Prototype

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	1	2	3	4	5
HAAS Section								
AA	0.115	0.135		.135	.135	.135	.135	.135
AB	0.290	0.310		.300	.300	.300	.300	.300
AC	0.040	0.060		.046	.046	.080	.050	.040
AD	0.115	0.135		.127	.127	.127	.127	.127
AE	0.240	0.260		.250	.249	.250	.250	.250
AF	0.188	0.193		.188	.188	.188	.188	.188
AG	0.240	0.260		.250	.250	.250	.250	.250
AH	1.126	1.146		1.145	1.145	1.141	1.144	1.141
AI	0.454	0.474		.474	.474	.474	.474	.474
AJ	0.240	0.260		.250	.250	.250	.250	.250
AK	0.053	0.073		.063	.063	.063	.063	.063
AL	0.257	0.262		.260	.260	.260	.260	.260
AM	1.663	1.683		1.682	1.682	1.678	1.675	1.675
AN	0.053	0.073		.063	.063	.063	.063	.063
AO	0.022	0.042		.032	.032	.032	.032	.032
AP	2.779	2.789		2.785	2.785	2.785	2.785	2.785
AQ								
AR								
AS								
AT								
Accept/Reject								

Measured by: <u>RA</u>	Date: <u>12-9-24</u>
Audited by: <u>FK</u>	Date: <u>12/09/25</u> <u>12/09/26</u>
Prototype Approval: <u>DAS</u>	Date: <u>12-89</u>

Rev	Date	Change	Revised by	Approved
A	02.12.12	New Issue	KJ/RF	
B	08.04.21	Reformat	KJ/JLM	
C	12.01.31	Dwg Rev updated	KJ	

NOTES:

1) MATERIAL: 17-4 PH STAINLESS STEEL, H900 OR H925 CONDITION
MIN UTS = 170 KSI (38 HRC)
(REF DART SPEC. D6104)

2) FINISH: NONE

3) TOLERANCES: PER DART QSI 018 (REF. X.XXX = ± 0.010) UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

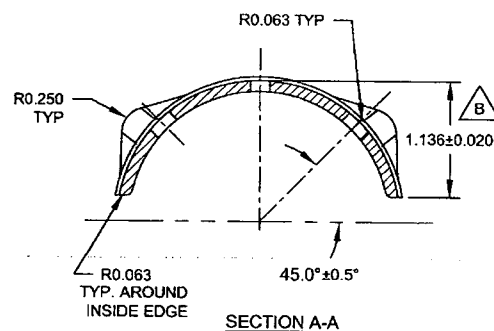
6) IDENTIFICATION: DART LOGO (PER DART SUPPLIED GRAPHIC) AND PART NUMBER IN THIS AREA WITH 0.125 HIGH LETTERING
0.010-0.020 DEEP, PER DART QSI 044 6.3.

7) WEIGHT: 0.41 lb

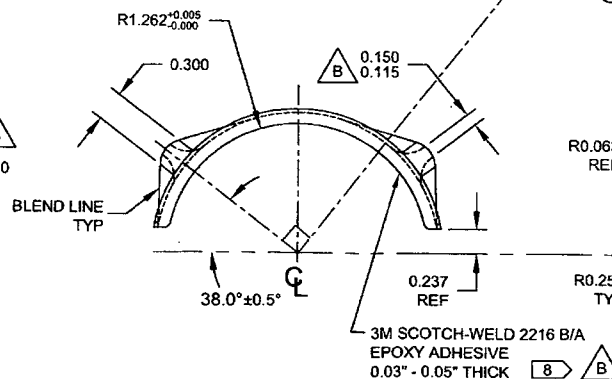
8) FOR THE ENTIRE INNER CONCAVE SURFACE:
ABRADE SURFACE WITH 400-GRIT SANDPAPER. REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY 0.03" TO 0.05" THICK LAYER OF 3M SCOTCH-WELD 2216 B/A ADHESIVE TO MATING SURFACE OF SUPPORT. ALLOW TO CURE FOR 24 HOURS.

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 90330 ML
12-09-18

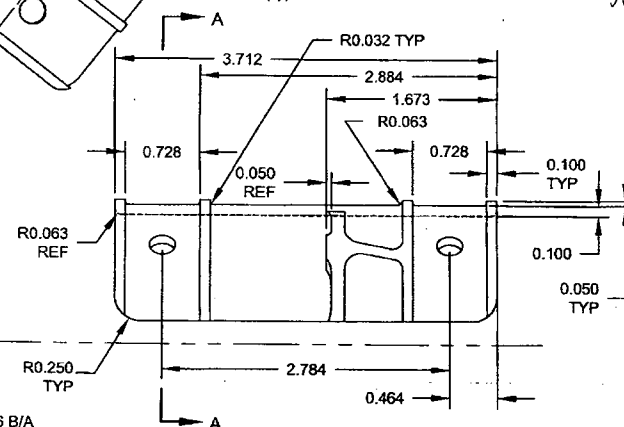
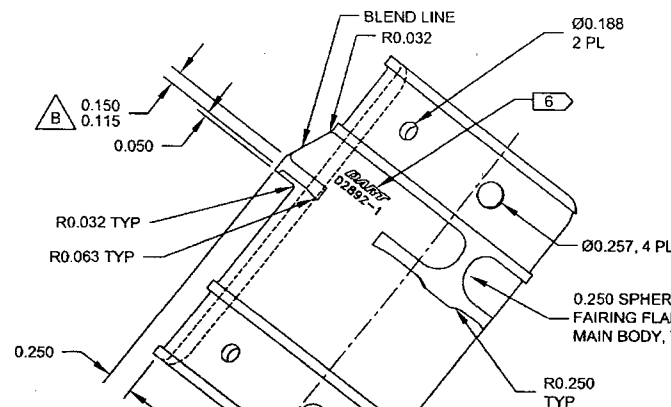
RELEASED
2011-07-28



SECTION A-A



D2892-1 SUPPORT



B	RMV FINISH, ADD 3M 2216, ADD H925 MATL OPTION, UPDATE TOLERANCE (ZN D5-1, B5-1, B6-1)	CP	11.07.15
A	NEW ISSUE	CP	00.11.17
REV.	DESCRIPTION	BY	DATE
DESIGN	97		
DRAWN	97		
CHECKED	ASS		
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	11.07.15		

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. D2892
TITLE Ø2.500 SUPPORT
REV. B
SHEET 1 OF 1
SCALE NTS

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